

Step 3: Once logged into your account you should be on your personal dashboard as seen below.

First Financial Administrators, Inc.
First in Service and Expertise

866-853-3539

555123456
Last login: 10:42am on Jun 27, 2018

My Accounts Claims Resources

Personal Dashboard

Your Accounts
Plan years to show: Previous Current Future

Get Reimbursed Faster
Add your bank account for direct deposit reimbursement + ADD

Alerts
Right now you're only receiving email alerts. Click below to maximize the value of your account. Link your mobile phone and get real-time balance updates!
[SIGN UP](#)

May 17, 2018 12:24 pm Participant Claim Entry Online Claim Received
[SEE ALL](#)

Recent Transactions

(\$0.01)	Flexible Spending Account	Denied	Claim May 17, 2018
(\$12.50)	Flexible Spending Account	Approved	Claim Sep 12, 2017
(\$12.30)	Flexible Spending Account	Approved	Claim Sep 12, 2017
(\$25.00)	Flexible Spending Account	Denied	Claim Sep 10, 2017
(\$75.00)	Flexible Spending Account	Approved	Claim Sep 1, 2017
(\$2.00)	Flexible Spending Account	Denied	Claim Jun 15, 2017
(\$200.00)	Flexible Spending Account	Denied	Claim Jun 16, 2017
(\$34.56)	Flexible Spending Account	Denied	Claim Sep 8, 2016
(\$0.25)	Flexible Spending Account	Denied	Claim Nov 1, 2016
(\$5.00)	Flexible Spending Account	Denied	Claim Oct 6, 2016

[SEE ALL](#)

Step 4: You'll select your name, found in the highlighted area below.

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Step 5: Select the add family member button at the bottom of the user profile page.

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log out

My Accounts | Claims | Resources

User Profile

NOTE: To update personal information email techsupport@ffga.com. You will also need to update with your employer.

 change picture	 Phone	 Home Address
KATHY BLUNT	 Email Address	123 NORTH 5TH AUSTIN TX, 75069 US
Date of Birth no data	ffsolutionsdemo@ffga.com	Mailing Address
Employee ID *****3456	 Employer	 edit
Marital Status None	FFSolutions 2015	Reimbursement Method
Gender None	SSN no data	Check
	Employee Status Active	

Family Members

[+ ADD FAMILY MEMBER](#)

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Step 6: Complete the form that populates. Ensure the box is selected for a debit card to be disbursed. Select Next to complete the transaction and add the member to the desired plan.

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My Accounts | Claims | Resources | 555123456 | log out

User Profile

NOTE: To **Add Family Member** **Employer.**

First Name * Last Name *

Initial **Issue Dependent Card**

General Info Use your primary address

Dependent ID * Address 1 *

Relationship Address 2

Date of Birth * City *

SSN * State *

Gender * ZIP *

Phone Country *

Full-time student

Family Members

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